## Case 18-25728 Doc 1 Filed 09/12/18 Entered 09/12/18 18:30:26 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself				
		About Debtor 1:	About De	ebtor 2 (Spouse Only in a Joint Case):	
1.	Your full name				
	Write the name that is on	Jocelyn			
	your government-issued picture identification (for example, your driver's	First name	First name	е	
	license or passport).	Middle name	Middle na	ame	_
	Bring your picture	Trevino			
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name	e and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	9			
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4452			

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Debtor 1 Jocelyn Trevino

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	8007 South Kilpatrick	If Debtor 2 lives at a different address:
		Chicago, IL 60652 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 **Jocelyn Trevino** 

ar	Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Required by</i> of page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	,
	choosing to file under	■ Cl	hapter 7				
		□ Ct	hapter 11				
		□ Ct	hapter 12				
			hapter 13				
3.	How you will pay the fee	_	about how yo	ou may pay. Ty attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more det urself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check w	ney
					stallments. If you choose this option of the control of the contro	n, sign and attach the Application for Individuals to Pa	ıy
			but is not req	uired to, waive	your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge m ur income is less than 150% of the official poverty line installments). If you choose this option, you must fill o	that
						ial Form 103B) and file it with your petition.	
).	Have you filed for bankruptcy within the	■ No	).				
	last 8 years?	☐ Ye	s.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy	■ No	)				
	cases pending or being filed by a spouse who is not filing this case with	☐ Ye	s.				
	you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.			
	residence:	☐ Ye	s. Has yo	ur landlord obt	tained an eviction judgment agains	t you?	
				No. Go to line	12.		
				Yes. Fill out In		Judgment Against You (Form 101A) and file it as part of	of

Document Page 4 of 55 Case number (if known) Debtor 1 **Jocelyn Trevino** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Jocelyn Trevino Document Page 5 of 55

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Det	otor 1 Jocelyn Trevino			Case nur	mber (if known)			
Par	t 6: Answer These Quest	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busi	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000			
		<u> </u>		□ 10,001-25,000	☐ More than100,000			
		200-99	99					
19.	How much do you	□ \$0 - \$ <u>\$</u>	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
		<b>山</b> \$500,0						
20.	How much do you estimate your liabilities	□ \$0 - \$ <del>!</del>		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion			
		<b>—</b> \$000,0	γοι φτιπποιι 					
Par								
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the in	formation provided is true and correct.			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupto and 3571	cy case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			lyn Trevino Trevino	Signature of De	ebtor 2			
			of Debtor 1	Ť				
		Executed		8 Executed on				
			MM / DD / YYYY		MM / DD / YYYY			

Debtor 1 Jocelyn Trevino Document Page 7 of 55 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James J. Morrone	Date	September 10, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
James J. Morrone 6201661		
Printed name		
James J. Morrone Law, PC		
Firm name		
12820 South Ridgeland, Unit C		
Palos Heights, IL 60463		
Number, Street, City, State & ZIP Code		
Contact phone (708) 653-3142	Email address	lawoffice@jamesmorronelaw.com
6201661 IL		
Bar number & State		

		Docume	ent Page 8 of 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jocelyn Trevino			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				П
				_

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	145,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,550.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	164,550.00
Par	t 2: Summarize Your Liabilities		
			i <b>abilities</b> It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	137,249.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	79,561.54
	Your total liabilities	\$	216,810.54
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,349.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,307.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Document Debtor 1 Jocelyn Trevino

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,089.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort A on Schoolule E/E compaths following:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill	in this in	formation to identify	your case and th						
Deb	otor 1	Jocelyn Tre	/ino						
		First Name		e Name	Last Name				
	otor 2 ouse, if filing)	First Name	Middle	e Name	Last Name				
Llni	ted States	Bankruptov Court for	the: NORTHER	N DISTRICT OF ILLIN	NOIS				
Oili	ieu Siales	Bankrupicy Court for	tile. NORTHER	IN DIGITATION OF ILLE	1010				
Cas	se number				_			- 0	
_								amended fili	ng
~ .	<i>.</i>	- 4004/5							
_		Form 106A/E	=						
Sc	ched	ule A/B: Pı	operty					12	2/15
nfor	mation. If i	nore space is needed, juestion.	attach a separate si	heet to this form. On the	e are filing together, both are e e top of any additional pages, v vn or Have an Interest In				).
D	o vou own	or have any legal or eq	uitable interest in a	anv residence, building,	land, or similar property?				
_	_			,,	iana, er emma property.				
	No. Go to								
-	Yes. Whe	ere is the property?							
1.1				What is the property	? Check all that apply				
	8007 S	outh Kilpatrick		☐ Single-family h		Do not deduct seco	ured claim	s or exemptions. I	Put
	Street addr	ess, if available, or other des	cription	☐ Duplex or mult	ti-unit building	the amount of any secured claims on Sched Creditors Who Have Claims Secured by Pro			
				☐ Condominium	or cooperative		Tavo Grammo Godarou zy i roporty.		
					or mobile home	Current value of t	ho (	Current value of	tho
	Chicag	o IL	60652-0000	☐ Land		entire property?		portion you own?	
	City	State	ZIP Code	Investment pro	operty	\$145,000	0.00	\$145,00	0.00
				☐ Timeshare ☐ Other		Describe the natu			
				<b>_</b> ••.	in the property? Check one	(such as fee simp a life estate), if kn	•	cy by the entiretion	es, or
				■ Debtor 1 only		Fee simple			
	Cook			Debtor 2 only					
	County			Debtor 1 and [	•			unity property	
					f the debtors and another  ou wish to add about this item.	(see instructions	5)		
				property identification		, sucii as IUCdi			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$145,000.00

Deb	tor 1	Case 18-25728 Doc 1  Jocelyn Trevino	Filed 09/12/18 Document	Entered 09/12/1 Page 11 of 55 Case	.8 18:30:26 De	esc Main
3. <b>C</b>	ars, var	ns, trucks, tractors, sport utility veh	icles, motorcycles			
	No	, , , , , , , , , , , , , , , , , , ,	, •			
	Yes					
-	res					
3.1	Make Mode	Flactor	Who has an interest in the	e property? Check one	the amount of any secur	claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
	Year:		■ Debtor 1 only □ Debtor 2 only		Current value of the	Current value of the
	Appro	oximate mileage:	Debtor 1 and Debtor 2 of	only	entire property?	portion you own?
	Other	r information:	☐ At least one of the debte	ors and another		
			Check if this is commo	unity property	\$1,500.00	\$1,500.00
.р	ages y	dollar value of the portion you own ou have attached for Part 2. Write the cribe Your Personal and Household Iter	nat number here			\$1,500.00
<b>Do</b> y 6. <b>H</b>	you ow	n or have any legal or equitable into  old goods and furnishings	erest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
_	<i>xample</i> ] No	es: Major appliances, furniture, linens,	china, kitchenware			
	Yes.	Describe				
		Misc household	goods and furniture			\$500.00
<b>E</b>	■ No ] Yes.	es: Televisions and radios; audio, video including cell phones, cameras, me Describe		oment; computers, printers,	scanners; music collect	ions; electronic devices
E		oles of value es: Antiques and figurines; paintings, p other collections, memorabilia, colle		oks, pictures, or other art ob	ojects; stamp, coin, or b	aseball card collections;
		Describe				
E		ent for sports and hobbies es: Sports, photographic, exercise, and musical instruments	d other hobby equipment;	bicycles, pool tables, golf c	lubs, skis; canoes and k	ayaks; carpentry tools;
		Describe				
_	_ ′	n <b>s</b> <i>les:</i> Pistols, rifles, shotguns, ammuniti	on, and related equipmen	t		
	No Yes	Describe				

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Jocelyn Trevino** 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$350.00 Misc clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$850.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... \$100.00 Cash on hand Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$100.00 First American Bank Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No

Schedule A/B: Property

Official Form 106A/B

Case 18-25728

Doc 1

Filed 09/12/18

Entered 09/12/18 18:30:26

Desc Main

page 3

		Case 18-25728	Doc 1	Filed 09/12/18 Document	Entered 09/12 Page 13 of 55	2/18 18:30:26	Desc Main
De	ebtor 1	Jocelyn Trevino		Document		Case number (if known)	
	☐ Yes. 0	Give specific information ab Issue	oout them er name:				
21.	Retirem Examp	nent or pension accounts les: Interests in IRA, ERISA	A, Keogh, 401	1(k), 403(b), thrift saving	s accounts, or other pe	nsion or profit-sharing	plans
	Yes. I	ist each account separatel. Type of	y. account:	Institution n	ame:		
		401k		TJX 401(k	) Plan Interest		\$14,000.00
22.	Your sh	y deposits and prepayme nare of all unused deposits les: Agreements with landlo	you have ma				nies, or others
	☐ Yes			Institution n	ame or individual:		
23.	■ No	es (A contract for a periodic	. ,		life or for a number of	years)	
	☐ Yes		·				
24.		s in an education IRA, in a C. §§ 530(b)(1), 529A(b), ar		n a qualified ABLE pro	gram, or under a qua	lified state tuition pro	ogram.
	☐ Yes	Institution na	me and desc	ription. Separately file th	e records of any intere	sts.11 U.S.C. § 521(c):	
25.	■ No	equitable or future intere		rty (other than anythin	g listed in line 1), and	rights or powers exe	ercisable for your benefit
		Give specific information al					
26.		s, copyrights, trademarks, les: Internet domain names				ts	
	☐ Yes.	Give specific information al	bout them				
27.		es, franchises, and other of the second seco			n holdings, liquor licens	es, professional licens	es
		Give specific information al	bout them				
M	oney or p	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	□ No	unds owed to you					
	Yes. (	Give specific information ab	out them, inc	cluding whether you alrea	ady filed the returns an	d the tax years	
						]	
			MIsc	tax refund			\$3,000.00
29.	Family :	support les: Past due or lump sum a	alimony, spo	usal support, child suppo	ort, maintenance, divord	ce settlement, property	settlement
	■ No □ Yes. 0	Give specific information					
30.		mounts someone owes y les: Unpaid wages, disabilit benefits; unpaid loans	ty insurance		efits, sick pay, vacation	pay, workers' compe	nsation, Social Security
	■ No	benents, unpaid toans	you made to	SOMEONIC CISC			

Schedule A/B: Property

Official Form 106A/B

		Case 18-25728	Doc 1	Filed 09/12/18 Document	Entered 09/12/18 18:30:26 Page 14 of 55 Case number (if known)	Desc Main		
D	ebtor 1	Jocelyn Trevino			Case number (if known)			
	☐ Yes.	Give specific information						
31	_Examp	sts in insurance policies ples: Health, disability, or life	insurance; h	ealth savings account (l	HSA); credit, homeowner's, or renter's insuran	ce		
	■ No	Name of the Commence of the co		Paragraph Pat Standard				
	⊔ Yes.	Name the insurance compa Comp	ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
32	If you a some o	terest in property that is do are the beneficiary of a living one has died.  Give specific information			d surance policy, or are currently entitled to rece	eive property because		
33		s against third parties, whe			t or made a demand for payment to sue			
		Describe each claim						
34	84. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ■ No							
	☐ Yes.	Describe each claim						
35	. Any fin ■ No	nancial assets you did not	already list					
	_	Give specific information						
36					ny entries for pages you have attached	\$17,200.00		
Pa	art 5: De	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.			
		own or have any legal or equit	table interest i	n any business-related p	roperty?			
	_	to Part 6.						
	⊔ Yes. G	Go to line 38.						
Pa		scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.			
46	-		equitable int	terest in any farm- or o	commercial fishing-related property?			
		Go to Part 7.						
	☐ Yes	s. Go to line 47.						
Pa	art 7:	Describe All Property You C	Own or Have a	n Interest in That You Did	Not List Above			
53		I have other property of aroles: Season tickets, country						
	■ No							
	☐ Yes.	Give specific information						
54	1 Add t	the dollar value of all of vo	ur entries fro	om Part 7. Write that n	umber here	\$0.00		

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

Document Debtor 1 Jocelyn Trevino

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$145,000.00
56.	Part 2: Total vehicles, line 5	\$1,500.00		
57.	Part 3: Total personal and household items, line 15	\$850.00		
58.	Part 4: Total financial assets, line 36	\$17,200.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$19,550.00	Copy personal property total	\$19,550.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$164,550.00

Official Form 106A/B Schedule A/B: Property page 6

		17(1,111)	111 1 11111. 111111.	1.1	
Fill in this infor	mation to identify your	case:			
Debtor 1	Jocelyn Trevino				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	otions are	you claiming?	Check one only	, even if	your spouse is	s filing with	you.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
8007 South Kilpatrick Chicago, IL 60652 Cook County	\$145,000.00		\$7,751.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2010 Hyundai Electra Line from Schedule A/B: 3.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(c)
Line IIIIII Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
Misc household goods and furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Iron Schedule A.D. V.1			100% of fair market value, up to any applicable statutory limit	
Misc clothing Line from Schedule A/B: 11.1	\$350.00		\$350.00	735 ILCS 5/12-1001(a)
Line Iron Schedule A.D. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B: 16.1	\$100.00	-	\$100.00	735 ILCS 5/12-1001(b)
LINE HOTH SCHEdule AVD. 10.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	- coosiyii iroviiio				
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	hecking: First American Bank	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
LII	ne nom <i>schedule Arb.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	01k: TJX 401(k) Plan Interest	\$14,000.00	•	\$14,000.00	735 ILCS 5/12-1006
LII	ile nom ochedale PVB. 2111			100% of fair market value, up to any applicable statutory limit	
	Isc tax refund	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(b)
LII	ne nom <i>Schedule Arb.</i> <b>20.1</b>			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
		red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Cas	se 18-25728		itered 09/12/18 18:3 ie 18 of 55	30:26 Desc N	1ain
Fill in this informa	ation to identify yo				
Debtor 1	Jocelyn Trevin	O Middle Name Last Na	ame		
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na	ame		
United States Banl	kruptcy Court for the	: NORTHERN DISTRICT OF ILLINOIS			
Case number				_	if this is an ded filing
Official Form Schedule [		s Who Have Claims Secu	ured by Propert	y	12/15
		If two married people are filing together, both out, number the entries, and attach it to this fo			
. Do any creditors h	ave claims secured b	y your property?			
□ No. Check t	this box and submit	this form to the court with your other schedu	les. You have nothing else to	o report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
		more than one secured claim, list the creditor sep	Column A	Column B	Column C
for each claim. If mo	re than one creditor ha	s a particular claim, list the other creditors in Part ical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Citimortga	ge	Describe the property that secures the claim		\$145,000.00	\$0.00
Creditor's Name  Attn: Centr  Bankruptcy		8007 South Kilpatrick Chicago, IL 60652 Cook County			
Po Box 943	38	As of the date you file, the claim is: Check all apply.	that		
Po Box 943 Gettsburg,	38		that		
Po Box 943 Gettsburg,	38 MD 20898 City, State & Zip Code	apply. ☐ Contingent	that		
Po Box 943 Gettsburg, Number, Street, 0	38 MD 20898 City, State & Zip Code	apply. ☐ Contingent ☐ Unliquidated ☐ Disputed			
Po Box 943 Gettsburg, Number, Street, 0	MD 20898 City, State & Zip Code ot? Check one.	apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage	e or secured		
Po Box 943 Gettsburg, Number, Street, 0  Who owes the deb Debtor 1 only Debtor 2 only Debtor 1 and Deb	MD 20898  City, State & Zip Code  of? Check one.	apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage car loan)	e or secured		
Po Box 943 Gettsburg, Number, Street, 0  Who owes the deb Debtor 1 only Debtor 2 only Debtor 1 and Deb	MD 20898  City, State & Zip Code  of? Check one.  otor 2 only e debtors and another im relates to a	apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's	e or secured		

Add the dollar value of your entries in Column A on this page. Write that number here: \$137,249.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$137,249.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 19 of 55	_	
Fill in this in	formation to identify your	case:			
Debtor 1	Jocelyn Trevino				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case number	r				
(if known)				☐ Check if this is an	
				amended filing	
Official Fo	orm 106E/F				
Schedule	E/F: Creditors W	ho Have Unsecured	Claims	12/15	
Schedule G: Ex Schedule D: Cr left. Attach the	ecutory Contracts and Unexpreditors Who Have Claims Sec	oired Leases (Official Form 106G). I cured by Property. If more space is	list executory contracts on Schedule A/B: Do not include any creditors with partially needed, copy the Part you need, fill it out port in a Part, do not file that Part. On the	secured claims that are listed in , number the entries in the boxes of	on the
Part 1: Lis	st All of Your PRIORITY Un	nsecured Claims			
1. Do any cr	editors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2:	st All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cre	editors have nonpriority unsec	cured claims against you?			
☐ No. Yo	u have nothing to report in this p	eart. Submit this form to the court with	your other schedules.		
Yes.					
unsecured	claim, list the creditor separately	y for each claim. For each claim listed	ne creditor who holds each claim. If a cred d, identify what type of claim it is. Do not list of have more than three nonpriority unsecured	claims already included in Part 1. If m	
				Total claim	
4.1 Adv	ocate Christ Hospital	Last 4 digits of acc	count number	Unkn	own
Nonpi	riority Creditor's Name  O West 95th Street	When was the deb	t incurred?		
	Lawn, IL 60453 er Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply		
	incurred the debt? Check one.	As of the date you	ine, the claim is. Check all that apply		
■ De	ebtor 1 only	☐ Contingent			
	ebtor 2 only	☐ Unliquidated			
	ebtor 1 and Debtor 2 only	☐ Disputed			
	least one of the debtors and and	_ '	RITY unsecured claim:		
	neck if this claim is for a com	Па			
debt		☐ Obligations arisin	ng out of a separation agreement or divorce	that you did not	
_	claim subject to offset?	report as priority clai			
■ No		•	n or profit-sharing plans, and other similar de	bts	
☐ Ye	es	Other. Specify	Medical bill		

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Debtor 1 Jocelyn Trevino Case number (if know) 4.2 \$1,946.00 **Ata Credit** Last 4 digits of account number 1487 Nonpriority Creditor's Name 1700 West Cortland Street Opened 08/15 Last Active Suite 201 When was the debt incurred? 3/14/16 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Mercy Hospital And Other. Specify Medical Cen ☐ Yes 4.3 **Atq Credit** Last 4 digits of account number 8268 \$153.00 Nonpriority Creditor's Name 1700 West Cortland Street Opened 01/16 Last Active Suite 201 When was the debt incurred? 12/15 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Mercy Hospital And** Other. Specify Medical Cen ☐ Yes 4.4 \$68.00 **Atg Credit** Last 4 digits of account number 1232 Nonpriority Creditor's Name Opened 08/16 Last Active 1700 West Cortland Street When was the debt incurred? 04/16 Suite 201 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Mercy Hospital And** 

☐ Yes

**Medical Cen** 

Other. Specify

Document Page 21 of 55 Debtor 1 Jocelyn Trevino Case number (if know) 4.5 \$24.00 **Ata Credit** Last 4 digits of account number 2257 Nonpriority Creditor's Name 1700 West Cortland Street Opened 09/15 Last Active Suite 201 When was the debt incurred? 08/15 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Mercy Hospital And Other. Specify Medical Cen ☐ Yes 4.6 Begin With Therapy Services, Inc. Last 4 digits of account number \$50.00 Nonpriority Creditor's Name When was the debt incurred? 3301 W. 111th Street Chicago, IL 60655 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.7 **Bmw Financial Services** Last 4 digits of account number 6620 \$36,824.00 Nonpriority Creditor's Name Opened 11/05/16 Last Active **Attn: Bankruptcy Department** Po Box 3608 When was the debt incurred? 4/27/18 **Dublin, OH 43016** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Automobile

Debts to pension or profit-sharing plans, and other similar debts

Page 22 of 55 Case number (if know) Document Debtor 1 Jocelyn Trevino 4.8 \$5,866.00 Capital One Last 4 digits of account number 0425 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/09 Last Active Po Box 30285 When was the debt incurred? 07/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Capital One** 4.9 Last 4 digits of account number 7176 \$892.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 11/11 Last Active Po Box 30285 When was the debt incurred? 07/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 Capital One \$471.00 1779 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/10 Last Active Po Box 30285 When was the debt incurred? 07/18 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

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Jocelyn Trevino		Case number (if know)	
Chase Card Services	Last 4 digits of account number	2170	\$3,307.00
Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/16 Last Active 07/18	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citibank/Sears	Last 4 digits of account number	2476	\$4,382.00
Nonpriority Creditor's Name Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 10/15 Last Active 06/18	
St Louis, MO 63179  Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u>I</u>	
City of Chicago	Last 4 digits of account number	5805	\$1,195.54
Nonpriority Creditor's Name Deparment of Finance Utility Billing/PO Box 6330	When was the debt incurred?	Various	
Chicago, IL 60680-6330  Number Street City State Zlp Code	As of the date you file, the claim	is: Chock all that apply	
Who incurred the debt? Check one.	. So of the date you me, the claim	опсок ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify Utility bill		

Official Form 106 E/F

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Debtor 1 Jocelyn Trevino Case number (if know) 4.1 \$400.00 Com Ed Last 4 digits of account number Nonpriority Creditor's Name **Bill Payment Center** When was the debt incurred? various Chicago, IL 60668-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility bill ☐ Yes 4.1 **Genesis Bankcard Services** 0840 \$421.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 04/18 Last Active Po Box 4477 When was the debt incurred? 8/14/18 Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 MediCredit \$148.00 7745 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 1629 When was the debt incurred? Maryland Heights, MO 63043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bill ☐ Yes

<b>5</b>		Document Page 25 of 55 Case number (if know)	nan i
Debto	or 1 Jocelyn Trevino	Case number (if know)	
4.1 7	Mercy Hospital & Medical Center	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name PO Box 776459 Chicago, IL 60677-6459	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Various Medical Bill	
4.1	Mercy Medical Group	Last 4 digits of account number MG75	\$334.00
	Nonpriority Creditor's Name 28231 Network Place Chicago, IL 60673-1282	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bills	
4.1	Mercy Physician Billing	Last 4 digits of account number 7045	\$145.00
9	Nonpriority Creditor's Name 35072 Eaghle Way	When was the debt incurred?	<b>4.10.00</b>
	Chicago, IL 60678-8135		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Medical bill

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know) Debtor 1 Jocelyn Trevino OAC (for Path Consultants of 4.2 5455 \$49.00 0 Last 4 digits of account number Chgo) Nonpriority Creditor's Name **PO Box 500** When was the debt incurred? Baraboo, WI 53913-0500 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bill** Other. Specify 4.2 **OAC Collection Specialists** 7831 \$387.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Opened 8/17/15 Po Box 500 Baraboo, WI 53913 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Path CnsIts Of Chicago ☐ Yes 4.2 **Peoples Gas** \$800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Various** Chicago, IL 60687-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Utility bill

Page 27 of 55 Case number (if know) Debtor 1 Jocelyn Trevino 4.2 Radiological Physicians, Ltd 1008 \$37.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 2150 When was the debt incurred? Chicago, IL 60652-2150 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical bill ☐ Yes 4.2 Synchrony Bank/ JC Penneys 5913 \$4,488.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 07/12 Last Active Po Box 965060 When was the debt incurred? 06/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/Old Navy 5414 \$5,112.00 5 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 09/14 Last Active Po Box 965060 When was the debt incurred? 06/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

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Synchrony Bank/TJX	Last 4 digits of account number	5322	\$2,30
Nonpriority Creditor's Name			<b>4</b> =,30
Attn: Bankruptcy Dept	When we the debit to the 19	Opened 04/14 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	06/18	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.		***	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Walmart	Last 4 digits of account number	9213	\$5,67
Nonpriority Creditor's Name	Last 4 digits of account number		ΨΟ,ΟΙ
Attn: Bankruptcy Dept		Opened 10/15 Last Active	
Po Box 965060	When was the debt incurred?	06/18	
Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тыт арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
_			
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.	
At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt			
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes			
<u> </u>	Other. Specify Credit Card	<u> </u>	
Target	Land de die Verseleren	2127	\$3,08
Target Nonpriority Creditor's Name	Last 4 digits of account number		<b>უ</b> ა,∪8.
Target Card Services		Opened 11/13 Last Active	
Mail Stop NCB-0461	When was the debt incurred?	06/18	
Minneapolis, MN 55440			
Number Street City State Zlp Code	As of the date you file, the claim i	IS: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
-	Debts to pension or profit-sharin		

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Credit Card

☐ Yes

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Jocelyn Trevino

have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill or		e additional creditors here. If you do not have additional persons to be					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
ATG Credit,LLC	Line <b>4.17</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 14895 Chicago, IL 60614		Part 2: Creditors with Nonpriority Unsecured Claims					
O. 110 ago, 12 000 14	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Pathology Consultants of Chicago,	Line <b>4.20</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 88493 Chicago, IL 60680-1493		■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				 
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 79,561.54
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 79,561.54

		17000000		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Jocelyn Trevino			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the cor, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	•				
	Name				_
	ivanie				
	Number	Street			_
	City		State	ZIP Code	_
2.2	City		Otate	Zii Code	
2.3					_
	Name				
	Number	Street			_
	Number	Street			
				710.0	_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	1401110				
	Number	Street			_
	City		State	ZIP Code	_
	,				

		Docume	nt Page 31 of	<u>55</u>
Fill in this in	formation to identify your o	case:		
Debtor 1	Jocelyn Trevino			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numbe	r			
(if known)				☐ Check if this is an amended filing
Official	Form 106H			
	ile H: Your Code	phtors		12/15
Jeneau	ne II. Tour Cou			12/13
	nd case number (if known). ou have any codebtors? (If y			a codebtor.
	n the last 8 years, have you California, Idaho, Louisiana,			(Community property states and territories include gton, and Wisconsin.)
■ No. G	o to line 3.			
☐ Yes. [	Did your spouse, former spou	se, or legal equivalent live	with you at the time?	
in line 2	again as a codebtor only if 16D), Schedule E/F (Official	that person is a guarant	tor or cosigner. Make su	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	blumn 1: Your codebtor me, Number, Street, City, State and ZIF	<sup>o</sup> Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1 <b>Ec</b>	lgar Melicio			☐ Schedule D, line
	43 West 64th Street			Schedule E/F, line 4.7
Cł	nicago, IL 60629			☐ Schedule G
				Bmw Financial Services

Schedule H: Your Codebtors

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							_				
Fill	in this information to identify your ca	ase:									
Del	otor 1 Jocelyn Tre	vino				_					
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILL	INOIS		_					
(If kr	se number		-				☐ An				
	fficial Form 106I						MM	// DD/ Y	YYY		
S	chedule I: Your Inc	ome									12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	r spouse is not filing wi	ith you, d	o not includ	e infori	natio	on about y	our spo	use. If mor	e space is	needed,
1.	Fill in your employment information.		Debtor	1			ı	Debtor 2	or non-fili	ng spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Employed					
	attach a separate page with information about additional	_mproyment etatae	☐ Not employed				I	☐ Not employed			
	employers.	Occupation	Assis	tant Store	Manag	er					
	Include part-time, seasonal, or self-employed work.	Employer's name	Marsh	alls							
	Occupation may include student or homemaker, if it applies.	Employer's address	4612 \ Chica	West Irving go, IL	Park I	Roa	d 				
		How long employed to	here?	5 years				_			
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have	nothing to re	port for	any l	line, write \$	\$0 in the	space. Inclu	ude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine th	e information	for all e	emplo	oyers for th	at perso	n on the line	es below. If	you need
							For Debt	or 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	4,3	16.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	-

4,316.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Jocelyn Trevino	-	(	Case	number (if know	n)					_
						r Debtor 1		non-f	ebtor iling s	spouse		
	Cop	by line 4 here	4.		\$_	4,316.0	0	\$		N/A	<u> </u>	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	801.6	7	\$		N/A		
	5b.	Mandatory contributions for retirement plans	5b	Ο.	\$	0.0	0	\$		N/A	_	
	5c.	Voluntary contributions for retirement plans	50	).	\$_	0.0	0	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	50	d.	\$_	0.0		\$		N/A	_	
	5e.	Insurance	5e		\$_	585.0	_	\$		N/A	_	
	5f.	Domestic support obligations	5f.		\$_	0.0		\$		N/A	_	
	5g. 5h.	Union dues Other deductions. Specify:	5g		\$ \$	0.0		* + \$		N/A	_	
_			_	1.+	· —	0.0	_	· —		N/A	_	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ <sub>_</sub>	1,386.6		\$		N/A	_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ <sub>_</sub>	2,929.3	3	\$		N/A	<u> </u>	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.0		<b>c</b>			¢		N/A		
	8b.	monthly net income.  Interest and dividends	8a 8b		\$ \$	0.0		\$		N/A N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		J.	Ψ_	0.0	<u> </u>	Ψ		N/A	<u>.                                    </u>	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>.</b>	\$	420.0	0	\$		N/A		
	8d.	Unemployment compensation	80		<b>\$</b> -	0.0	_	\$		N/A	_	
	8e.	Social Security	86	€.	\$	0.0		\$		N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$_	0.0		\$		N/A		
	8g.	Pension or retirement income	89		\$_	0.0		\$		N/A	_	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.0	0	+ \$		N/A	<u> </u>	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	<u> </u>	420.0	0	\$		N/	A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,349.33 +	\$		N/A	= \$	3,349.3	3
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		٠-		0,0 10100	Ť -		1071		0,0 1010	Ť
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe							∍ J. +\$	0.0	00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	3,349.3	3
13.	Do :	you expect an increase or decrease within the year after you file this form	?						'	Combi month	ned ly income	;
		No.										

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:			1		
Deb	tor 1	Jocelyn Trev	/ino			Che	eck if this is:	
L.		- Coolyn III				An amended filing		
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	· NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
		upicy Court for the	. 101(11	IERRA DIOTRIOT OF IEERA	010		WIWI / DD / TTTT	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ N		iii a copai.					
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		_ 3	■ Yes □ No
					Daughter		6	⊔ No ■ Yes
								□ No
					Daughter		12	Yes
								□ No □ Yes
3.		enses include	. =	No				□ Tes
		f people other t d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
Est exp	imate your ex	penses as of ye	our bankr	uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	s paid for with	non-cash	government assistance i	f you know			
the		n assistance an		luded it on Schedule I: \			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	1,020.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's				4b.	\$	0.00
		maintenance, re owner's associat	•	ipkeep expenses		4c. 4d.	·	100.00 0.00
5.				our residence, such as ho	me equity loans	4u. 5.		0.00

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Deptor 1	locelyn Trevino	Case numi	ber (if known)	
6. Utilities	<b>3</b> ;			
	Electricity, heat, natural gas	6a.	\$	200.00
	Vater, sewer, garbage collection	6b.	·	107.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	140.00
	Other. Specify: Cable and Internet	6d.	\$	120.00
	nd housekeeping supplies	— 7.	\$	600.00
	are and children's education costs	8.	\$	150.00
	ng, laundry, and dry cleaning	9.	\$	50.00
		10.	\$	
	al care products and services		·	50.00
	Il and dental expenses	11.	\$	150.00
	ortation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	450.00
	include car payments. innment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ible contributions and religious donations	14.	\$	0.00
5. <b>Insura</b> n	•	14.	Ψ	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	/ehicle insurance	15c.	·	130.00
	Other insurance. Specify:	15d.	*	0.00
		13u.	Ψ	0.00
Specify:	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
. ,	nent or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17a. 17b.	·	0.00
	Other. Specify:	176. 17c.	·	0.00
	Other. Specify:	17d.	·	0.00
	ayments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specify:		19.	*	
	eal property expenses not included in lines 4 or 5 of this form or on Scho		ur Income.	
	Nortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Anintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
		21.	·	
1. Other: S	Specify: Childrens Activities		тφ	40.00
2. Calcula	ate your monthly expenses			
22a. Ad	ld lines 4 through 21.		\$	3,307.00
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	,
	ld line 22a and 22b. The result is your monthly expenses.		\$	3,307.00
o. / tal	and LLG and LLD. The rooth to your monthly expended.			3,307.00
	ate your monthly net income.			
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,349.33
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$	3,307.00
		1	-	<u> </u>
23c. S	Subtract your monthly expenses from your monthly income.		Φ.	40.00
T	he result is your monthly net income.	23c.	\$	42.33
	expect an increase or decrease in your expenses within the year after you nple, do you expect to finish paying for your car loan within the year or do you expect you			se or decrease because of a
modificat	tion to the terms of your mortgage?			
modificat  No.	tion to the terms of your mortgage?			

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Jocelyn Trevino				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Ford Declarate		an Individual	Debtor's So	chedules	12/15
You must file th obtaining mone	is form whenever you f	n connection with a banl	s or amended schedule	s. Making a false stater	ment, concealing property, or ), or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice,
				Declaration,	and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration	n and
X /s/.loc	celyn Trevino		X		
	yn Trevino		Signature o	of Debtor 2	
	ure of Debtor 1		-		

Date \_\_\_\_\_

Date September 10, 2018

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	in this inform	nation to identify you	r case:					
De	btor 1	Jocelyn Trevino First Name	Middle Name	Last Name				
	btor 2	First Name	Middle Name	Last Name				
		nkruptcy Court for the:	NORTHERN DISTRICT (					
011	ned Olales Dai	ikruptcy Court for the.	NORTHERN BIOTRIOT	or illustration				
	se number				_	Check if this is an mended filing		
St Be	as complete a	of Financial		are filing together, both are	equally responsible for sup			
		n). Answer every ques		this form. On the top of any	/ additional pages, write you	ar name and case		
Ра 1.	<u> </u>	etails About Your Ma	rital Status and Where You	Lived Before				
٠.		Current maritar state	13:					
	<ul><li>■ Married</li><li>■ Not married</li></ul>	ried						
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?				
	■ No □ Yes. List	<ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>						
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
<b>3.</b> stat					ity property state or territory co, Texas, Washington and W			
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).				
Pa	rt 2 Explain	n the Sources of You	r Income					
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?		
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income	Gross income	Sources of income	Gross income		
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$36,992.00	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

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Page 38 of 55 Case number (if known) Debtor 1 Jocelyn Trevino

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2017 )	■ Wages, commissions, bonuses, tips	\$47,345.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$43,305.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
5.	Include include and other winnings.  List each s	come regard public bene If you are fili	lless of wheth fit payments; ng a joint cas he gross inco	pensions; rental income; inter e and you have income that y	amples of other income are a rest; dividends; money collect you received together, list it o tely. Do not include income the	ted from lawsuits; royalties; nly once under Debtor 1.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:	Est Child support to date	\$3,600.00		
	r last calen anuary 1 to		31, 2017 )	Est child support	\$4,800.00		
	r the calend anuary 1 to			Est Child support	\$4,800.00		
Pa	rt 3: List	: Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	,	Debtor 1's	or Debtor 2'	s debts primarily consume	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. §	101(8) as "incurred by an
		During the	90 davs befo	re vou filed for bankruptcv. di	d you pay any creditor a total	of \$6.425* or more?	
		□ No.	Go to line 7		, , , , ,	. ,	
		☐ Yes	paid that cre		d a total of \$6,425* or more into the for domestic support oblights bankruptcy case.		
		* Subject			s after that for cases filed on	or after the date of adjustme	ent.
	■ Yes.			r both have primarily consure you filed for bankruptcy, di	imer debts. d you pay any creditor a total	of \$600 or more?	
		■ No.	Go to line 7				
		□ Yes	include pay		d a total of \$600 or more and bligations, such as child supp		
	Creditor'	s Name and	- Address	Dates of navme	ent Total amount	Amount you Was thi	s navment for

still owe

paid

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ase number (if known) Debtor 1 **Jocelyn Trevino** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe Include creditor's name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. □ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened **BMW Financial Services** 2018 Unknown Attn: Bankruptcy Dept PO Box 3608 Property was repossessed. **Dublin, OH 43016** ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? П Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

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Debtor 1 Jocelyn Trevino

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Case number (if known)

Pa	rt 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contrib	, did you give any gifts or contributions with a tota ution.	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Pa	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,			
	how the loss occurred Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pa	rt 7: List Certain Payments or Transfers	. ,					
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you			
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	James J. Morrone Law, PC 12820 South Ridgeland, Unit C Palos Heights, IL 60463 lawoffice@jamesmorronelaw.com	Attorney Fees	August 2018	\$1,200.00			
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you l		or transfer any prope	rty to anyone who			
	No						
	Yes. Fill in the details.  Person Who Was Paid	Description and value of any property	Date navment	Amount of			
	Address	transferred	Date payment or transfer was made	payment			

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Case number (if known) Document

Jocelyn Trevino Debtor 1

<ul> <li>18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to a transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortginclude gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>							
	Person Who Received Transfer Address	Description and property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made	
	Person's relationship to you				-		
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device	of which you are a	
	Name of trust	Description and	value of the prop	perty trans	ferred	Date Transfer was	
						made	
Par	List of Certain Financial Accounts, Inst	ruments, Safe Deposi	t Boxes, and Sto	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	other financial accou	nts; certificates	of deposit			
	houses, pension funds, cooperatives, associations, and other financial institutions.  No						
	Yes. Fill in the details.						
		Last 4 digits of account number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing of transfe	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, an	ıy safe dep	osit box or other deposi	itory for securities,	
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than you	r home within 1	year befor	e you filed for bankrupto	ey?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility	Who else has or	had access	Describe	the contents	Do you still	
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		Describe	ine contents	have it?	
Par	t 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any propert	y you borr	owed from, are storing f	or, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe	the property	Value	
Par	t 10: Give Details About Environmental Infor	mation					
ror	the purpose of Part 10, the following definition	ns apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 Jocelyn Trevino

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? П Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Describe the nature of the business

Name of accountant or bookkeeper

No

**Business Name** 

Address

Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Name Address (Number, Street, City, State and ZIP Code) Date Issued

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

**Employer Identification number** 

Dates business existed

Do not include Social Security number or ITIN.

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Debtor 1 Jocelyn Trevino

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jo	celyn Trevino	
Jocelyn Trevino		Signature of Debtor 2
Signa	ature of Debtor 1	
Date	September 10, 201	8 Date
Did yo	ou attach additional pag	ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes	3	
Did yo	ou pay or agree to pay s	someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes	s. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:			
Debtor 1	Jocelyn Trevino				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Fo	rm 108				
Statemen	t of Intentio	n for Indiv	iduals Filinç	g Under Chapte	r 7 12/15
If you are an indiv	vidual filing under cha	oter 7, you must fill	out this form if:		
creditors have	claims secured by yo	ur property, or			
You must file this	ver is earlier, unless th	ithin 30 days after	you file your bankrupt		for the meeting of creditors, creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bot	h are equally respons	ible for supplying correct inf	formation. Both debtors must
	nd accurate as possib our name and case nur		needed, attach a sepa	arate sheet to this form. On t	he top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims			
1. For any credito	ors that you listed in Pa	art 1 of Schedule D:	Creditors Who Have	Claims Secured by Property	(Official Form 106D), fill in the
information be					
identity the cre	untor and the property to	iat is conateral	secures a debt?	to do with the property that	Did you claim the property as exempt on Schedule C?
Creditor's Ci	itimortgage		☐ Surrender the prop	perty.	□No
name:			Retain the proper	•	■ V
Description of	8007 South Kilpatr	•	Retain the propert Reaffirmation Agr		■ Yes
property securing debt:	IL 60652 Cook Co	unty	☐ Retain the propert	y and [explain]:	
					_
	ur Unexpired Persona		n Schedule G: Execut	tory Contracts and Unexpired	d Leases (Official Form 106G), fill
in the information	n below. Do not list rea	l estate leases. Une	expired leases are leas	ses that are still in effect; the ssume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe your un	nexpired personal prop	perty leases			Will the lease be assumed?
Lessor's name:					□ No
Description of lea	sed				_
Property:					☐ Yes
Lessor's name:	and				□ No
Description of lea Property:	seu				☐ Yes
Lessor's name:					□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	btor 1 _	Jocelyn Trevino	Case number (if known	
	scription	of leased		☐ Yes
	,,,,,,,			L Tes
	ssor's nai	me: of leased		□ No
	perty:			☐ Yes
	ssor's nai	me: of leased		□ No
	perty:	oricascu		☐ Yes
	ssor's na	me: of leased		□ No
	perty:	or reaseu		☐ Yes
	ssor's na			□ No
	perty:	of leased		☐ Yes
Par	rt 3: S	ign Below		
		lty of perjury, I declare that I have indica tt is subject to an unexpired lease.	ated my intention about any property of my estate that s	ecures a debt and any personal
X		celyn Trevino	X	
		yn Trevino ure of Debtor 1	Signature of Debtor 2	
	Date	September 10, 2018	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-25728 Doc 1 Filed 09/12/18 Entered 09/12/18 18:30:26 Desc Main Document Page 50 of 55

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

In r	g Jocelyn Trevino		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSAT	TION OF ATTORN	EY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,200.00
	Prior to the filing of this statement I have received		\$	1,200.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation	n with any other person unl	ess they are memb	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of t			
5.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects of	the bankruptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering ad</li> <li>b. Preparation and filing of any petition, schedules, statement of</li> <li>c. Representation of the debtor at the meeting of creditors and of</li> <li>d. [Other provisions as needed]</li> </ul>	of affairs and plan which ma	y be required;	
6.	By agreement with the debtor(s), the above-disclosed fee does not represent a representation of the debtors in any discharge any other adversary proceeding. Negotiations of planning; preparation and filing of reaffirmation motions pursuant to 11 USC 522(f)(2)(A) for average of the debtor(s), the above-disclosed fee does not represent the debtors in any discharge any other adversary proceedings.	eability actions, judicia with secured creditors on agreements and appl	I lien avoidance to reduce to ma ications as nee	arket value; exemption eded; preparation and filing of
	CER	TIFICATION		
this	I certify that the foregoing is a complete statement of any agreed bankruptcy proceeding.	ment or arrangement for pag	yment to me for re	epresentation of the debtor(s) in
	September 10, 2018	/s/ James J. Morron	<b>e</b>	
_	Date	James J. Morrone 6	201661	
		Signature of Attorney  James J. Morrone L.	aw, PC	
		12820 South Ridgela	and, Unit C	
		Palos Heights, IL 60 (708) 653-3142 Fax:		
		lawoffice@jamesmo		
		Name of law firm		

### United States Bankruptcy Court Northern District of Illinois

In re	Jocelyn Trevino		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	32
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to the	e best of my
Date:	September 10, 2018	/s/ Jocelyn Trevino Jocelyn Trevino Signature of Debtor		

Advocate Christ Hospital 4440 West 95th Street Oak Lawn, IL 60453

Atg Credit 1700 West Cortland Street Suite 201 Chicago, IL 60622

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Atg Credit 1700 West Cortland Street Suite 201 Chicago, IL 60622

Atg Credit 1700 West Cortland Street Suite 201 Chicago, IL 60622

ATG Credit, LLC PO Box 14895 Chicago, IL 60614

Begin With Therapy Services, Inc. 3301 W. 111th Street Chicago, IL 60655

Bmw Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank/Sears Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citimortgage Attn: Centralized Bankruptcy Po Box 9438 Gettsburg, MD 20898

City of Chicago Department of Finance Utility Billing/PO Box 6330 Chicago, IL 60680-6330

Com Ed Bill Payment Center Chicago, IL 60668-0001

Edgar Melicio 3343 West 64th Street Chicago, IL 60629

Genesis Bankcard Services Po Box 4477 Beaverton, OR 97076

MediCredit PO Box 1629 Maryland Heights, MO 63043

Mercy Hospital & Medical Center PO Box 776459 Chicago, IL 60677-6459 Mercy Medical Group 28231 Network Place Chicago, IL 60673-1282

Mercy Physician Billing 35072 Eaghle Way Chicago, IL 60678-8135

OAC (for Path Consultants of Chgo) PO Box 500 Baraboo, WI 53913-0500

OAC Collection Specialists Attn: Bankruptcy Po Box 500 Baraboo, WI 53913

Pathology Consultants of Chicago, PO Box 88493 Chicago, IL 60680-1493

Peoples Gas Chicago, IL 60687-0001

Radiological Physicians, Ltd PO Box 2150 Chicago, IL 60652-2150

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440